

### UNITED STATES PATENT AND TRADEMARK OFFICE

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# NOTICE OF ALLOWANCE AND FEE(S) DUE

29894

7590

02/02/2007

DREISS, FUHLENDORF, STEIMLE & BECKER POSTFACH 10 37 62 D-70032 STUTTGART, GERMANY

| EXAMINER |              |  |  |  |  |
|----------|--------------|--|--|--|--|
| OLSZEW   | /SKI, JOHN   |  |  |  |  |
| ART UNIT | PAPER NUMBER |  |  |  |  |
| 3618     |              |  |  |  |  |

DATE MAILED: 02/02/2007

| APPLICATION NO. FILING DATE |            | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |  |
|-----------------------------|------------|----------------------|---------------------|------------------|--|
| 10/520 429                  | 01/06/2005 | Klausa Lanhart       | 2502.0171115        | 9910             |  |

TITLE OF INVENTION: STICK HANDLE WITH A TOGGLE STRAP

|                |              | 100110 000 0110 | PURI IOAMION FEE DUE | PREM DATE TOOLIE FEE | TOTAL PER(C) DUE | DATE DUE   |
|----------------|--------------|-----------------|----------------------|----------------------|------------------|------------|
| APPLN, TYPE    | SMALL ENTITY | ISSUE FEE DUE   | PUBLICATION FEE DUE  | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE   |
| nonprovisional | YES          | \$700           | \$300                | \$0                  | \$1000           | 05/02/2007 |

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE DOES NOT REFLECT A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE IN THIS APPLICATION. IF AN ISSUE FEE HAS PREVIOUSLY BEEN PAID IN THIS APPLICATION (AS SHOWN ABOVE), THE RETURN OF PART B OF THIS FORM WILL BE CONSIDERED A REQUEST TO REAPPLY THE PREVIOUSLY PAID ISSUE FEE TOWARD THE ISSUE FEE NOW

### HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

- A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.
- B. If the status above is to be removed, check box 5b on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

- A. Pay TOTAL FEE(S) DUE shown above, or
- B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.
- II. PART B FEE(S) TRANSMITTAL, or its equivalent, must be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). If you are charging the fee(s) to your deposit account, section "4b" of Part B Fee(s) Transmittal should be completed and an extra copy of the form should be submitted. If an equivalent of Part B is filed, a request to reapply a previously paid issue fee must be clearly made, and delays in processing may occur due to the difficulty in recognizing the paper as an equivalent of Part B.
- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

### PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FFE and PUBLICATION FFE (if required). Blocks 1 through 5 should be completed where

| CURRENT CORRESPOND                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ENCE ADDRESS (Note: Use BI                                                                                                                                                                                                                                                                                                                         | ock 1 for any change of address)                     | F                                   | ee(s)           | Transmittal. This c<br>Each additional p                               | ertificate cannot be used f                                                                                                                                                  | r domestic mailings of the<br>or any other accompanying<br>nt or formal drawing, must                                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-------------------------------------|-----------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| POSTFACH 10<br>D-70032 STUT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 37 62                                                                                                                                                                                                                                                                                                                                              | <sup>,2007</sup><br>MLE & BECKER                     | . I<br>S<br>a                       | heret<br>States | Certify  oy certify that this I  Postal Service with sed to the Mail S | cate of Mailing or Trans                                                                                                                                                     | g deposited with the United<br>st class mail in an envelope<br>above, or being facsimile                                              |
| GERMANY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                    |                                                      | L                                   |                 |                                                                        |                                                                                                                                                                              | (Depositor's name)                                                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                    |                                                      | <u> </u>                            |                 |                                                                        |                                                                                                                                                                              | (Signature)                                                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                    |                                                      | L                                   |                 |                                                                        |                                                                                                                                                                              | (Date)                                                                                                                                |
| APPLICATION NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | FILING DATE                                                                                                                                                                                                                                                                                                                                        |                                                      | FIRST NAMED INVENT                  | OR              | A <sup>c</sup>                                                         | TTORNEY DOCKET NO.                                                                                                                                                           | CONFIRMATION NO.                                                                                                                      |
| 10/520,428                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 01/06/2005                                                                                                                                                                                                                                                                                                                                         |                                                      | Klause Lenhart                      |                 |                                                                        | 2502 0171US                                                                                                                                                                  | 9910                                                                                                                                  |
| TITLE OF INVENTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | : STICK HANDLE WIT                                                                                                                                                                                                                                                                                                                                 | H A TOGGLE STRAP                                     |                                     |                 |                                                                        |                                                                                                                                                                              |                                                                                                                                       |
| APPLN. TYPE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | SMALL ENTITY                                                                                                                                                                                                                                                                                                                                       | ISSUE FEE DUE                                        | PUBLICATION FEE DU                  | JE P            | PREV. PAID ISSUE F                                                     | EE TOTAL FEE(S) DUE                                                                                                                                                          | DATE DUE                                                                                                                              |
| nonprovisional                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | YES                                                                                                                                                                                                                                                                                                                                                | \$700                                                | \$300                               |                 | \$0                                                                    | \$1000                                                                                                                                                                       | 05/02/2007                                                                                                                            |
| EXAM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | INER                                                                                                                                                                                                                                                                                                                                               | ART UNIT                                             | CLASS-SUBCLASS                      | $\neg$          | 7                                                                      |                                                                                                                                                                              |                                                                                                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                    | 3618                                                 | 280-822000                          |                 |                                                                        | •                                                                                                                                                                            |                                                                                                                                       |
| CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. |                                                                                                                                                                                                                                                                                                                                                    |                                                      |                                     |                 | ember a 2<br>of up to<br>name is 3                                     | pocument has been filed for                                                                                                                                                  |                                                                                                                                       |
| (A) NAME OF ASSIG                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | GNEE<br>·                                                                                                                                                                                                                                                                                                                                          | oletion of this form is NO                           | (B) RESIDENCE: (Cl                  | TY ar           | nd STATE OR COU                                                        | JNTRY)                                                                                                                                                                       | oup entity 🚨 Government                                                                                                               |
| 4a. The following fee(s):  Ussue Fee Publication Fee (N Advance Order - 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). |                                                      |                                     |                 |                                                                        |                                                                                                                                                                              |                                                                                                                                       |
| 5. Change in Entity Sta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | •                                                                                                                                                                                                                                                                                                                                                  | •                                                    |                                     |                 |                                                                        |                                                                                                                                                                              |                                                                                                                                       |
| ••                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | s SMALL ENTITY statu                                                                                                                                                                                                                                                                                                                               |                                                      |                                     |                 |                                                                        | ENTITY status. See 37 CI                                                                                                                                                     |                                                                                                                                       |
| NOTE: The Issue Fee an interest as shown by the i                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | d Publication Fee (if requeecords of the United Sta                                                                                                                                                                                                                                                                                                | uired) will not be accepted tes Patent and Trademark | d from anyone other that<br>Office. | in the          | applicant; a register                                                  | red attorney or agent; or th                                                                                                                                                 | e assignee or other party in                                                                                                          |
| Authorized Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ÷.                                                                                                                                                                                                                                                                                                                                                 |                                                      |                                     |                 | Date                                                                   |                                                                                                                                                                              |                                                                                                                                       |
| Typed or printed name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                    |                                                      | _                                   |                 |                                                                        |                                                                                                                                                                              |                                                                                                                                       |
| Alexandria, Virginia 223                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 13-1430.                                                                                                                                                                                                                                                                                                                                           |                                                      |                                     |                 |                                                                        | public which is to file (and<br>utes to complete, includin<br>nents on the amount of tir<br>demark Office, U.S. Depa<br>END TO: Commissioner to<br>plays a valid OMB control | by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, |



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| •                                    | POSTFACH I             | 0 37 62 | r           |                      | ART UNIT                       | PAPER NUMBER     |  |
|                                      | D-70032 STU<br>GERMANY | TTGART, | •           |                      | 3618<br>DATE MAILED: 02/02/200 |                  |  |

## Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 192 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 192 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571)-272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at 1-(888)-786-0101 or (571)-272-4200.